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Bib Data Sheet

CONFIRMATION NO. 3749

|  |   |                                  |   |  |                                |
|--|---|----------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/892,483   | <b>FILING DATE</b><br>06/28/2001<br><b>RULE</b>   | <b>CLASS</b><br>455              | <b>GROUP ART UNIT</b><br>2681   | <b>ATTORNEY DOCKET NO.</b><br>04329.2593 |                                |
| <b>APPLICANTS</b><br>Keiji Uehara, Hino-shi, JAPAN;<br>Keichi Ito, Hino-shi, JAPAN;  |   |                                  |   |  |                                |
| <b>** CONTINUING DATA *****</b> <i>none</i>  |   |                                  |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b> <i>imp</i><br>JAPAN 2000-200239 06/30/2000  |   |                                  |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 08/15/2001</b>   |   |                                  |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i><br>Examiners Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>8  | <b>TOTAL CLAIMS</b><br>16                | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>Finnegan, Henderson, Farabow,<br>Garrett & Dunner, L.L.P.<br>1300 I Street, N.W.<br>Washington, DC 20005-3315  |   |                                  |   |  |                                |
| <b>TITLE</b><br>Radio communication apparatus, radio communication system and stationary station   |   |                                  |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>710  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |